PTO/SB/01 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number P06587US00 **DECLARATION FOR UTILITY OR** First Named Inventor **DESIGN** SUCKOW, Robert E., et al. COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) **Application Number** Filing Date Declaration Declaration Submitted Submitted after Initial Art Unit With Initial Filing (surcharge Filing (37 CFR 1.16 (e)) Examiner Name required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: TILTING SCREED AND METHOD FOR USING SAME (Title of the Invention) the specification of which ~ is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. **Prior Foreign Application** Foreign Filing Date **Priority** Certified Copy Attached? Number(s) Country (MM/DD/YYYY) **Not Claimed** Yes

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. [Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number:		er: 2	2885	OR	Corresp	ondence address below
Name	*					
Address						
City			State			ZIP
Country	Telephone			Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST IN	IVENTOR:	☐ A p	etition ha	s been filed for th	is unsign	ed inventor
Given Name (first and middle [if any])	Robert E		Family Name or Surname		Suckow	
Inventor's Signature	Suckow	T.				Date 12-8-03
Residence: City	State lowa		· ·		Citizen	•
Maynard	lowa			USA		US
Mailing Address 515 First Str	reet North					
City	State		ZIP			Country
Maynard	lo	wa	\perp	50655		USA
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])	Richard A.			Family Name or Surname		Suckow
Inventor's Signature Richard (a. Suck	w			,	Date 12/8/03
Residence: City Oelwein	State		Country USA		Citizen	
Mailing Address	lowa				L	US
1214 111110 31	reet N.E.					
City	State		ZI	Р -	Country	<u> </u>
Oelwein	lowa			50662		USA
Additional inventors or a legal re	presentative are being named o	on thes	upplementa	ıl sheet(s) PTO/SB/02/	or 02LR at	tached hereto.

PTO/SB/81 (10-00)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	SUCKOW, Robert E., et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	P06587US00

I hereby appoint:					
Practitioners at Customer Number 22885 OR	Place Customer Number Bar Code Label here				
Practitioner(s) named below:					
Name	Registration Number				
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.					
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number.					
OR Firm or					
Individual Name					
Address					
Address					
City	State Zip				
Country					
	Fax				
I am the: Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name Robert E. Suckow					
Signatur Robert Suchow					
Dat 12-08-03					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
✓ *Total of forms are submitted.					

+

PTO/SB/81 (10-00)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	SUCKOW, Robert E., et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	P06587US00

I hereby appoint:					
✓ Practitioners at Customer Number 22885	Place Customer Number Bar Code				
OR	Label here				
Practitioner(s) named below:					
Name	Registration Number				
as my/our attorney(s) or agent(s) to prosecute the application id					
business in the United States Patent and Trademark Office con	nected therewith.				
Please change the correspondence address for the above-identi	fied application to:				
The above-mentioned Customer Number.					
OR					
Firm or					
Individual Name Address					
Address					
	State Zip				
Country					
	-ax				
I am the:					
Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.7 Statement under 37 CFR 3.73(b) is enclosed. (Form PTC	Assignee of record of the entire interest. See 37 CFR 3.71.				
SIGNATURE of Applicant or Assigned	e of Record				
Name Richard A. Suckow					
Signatur Richard a Suckar					
Date 12/8/03					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
Total of2 forms are submitted.					